

**Cancer : its origin and prevention, with other allied diseases, in connection with the Contagious Disease Act.**

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DISEASES ACT.

BY

D. W. WILLIAMS, M.D., M.R.C.P.L.,

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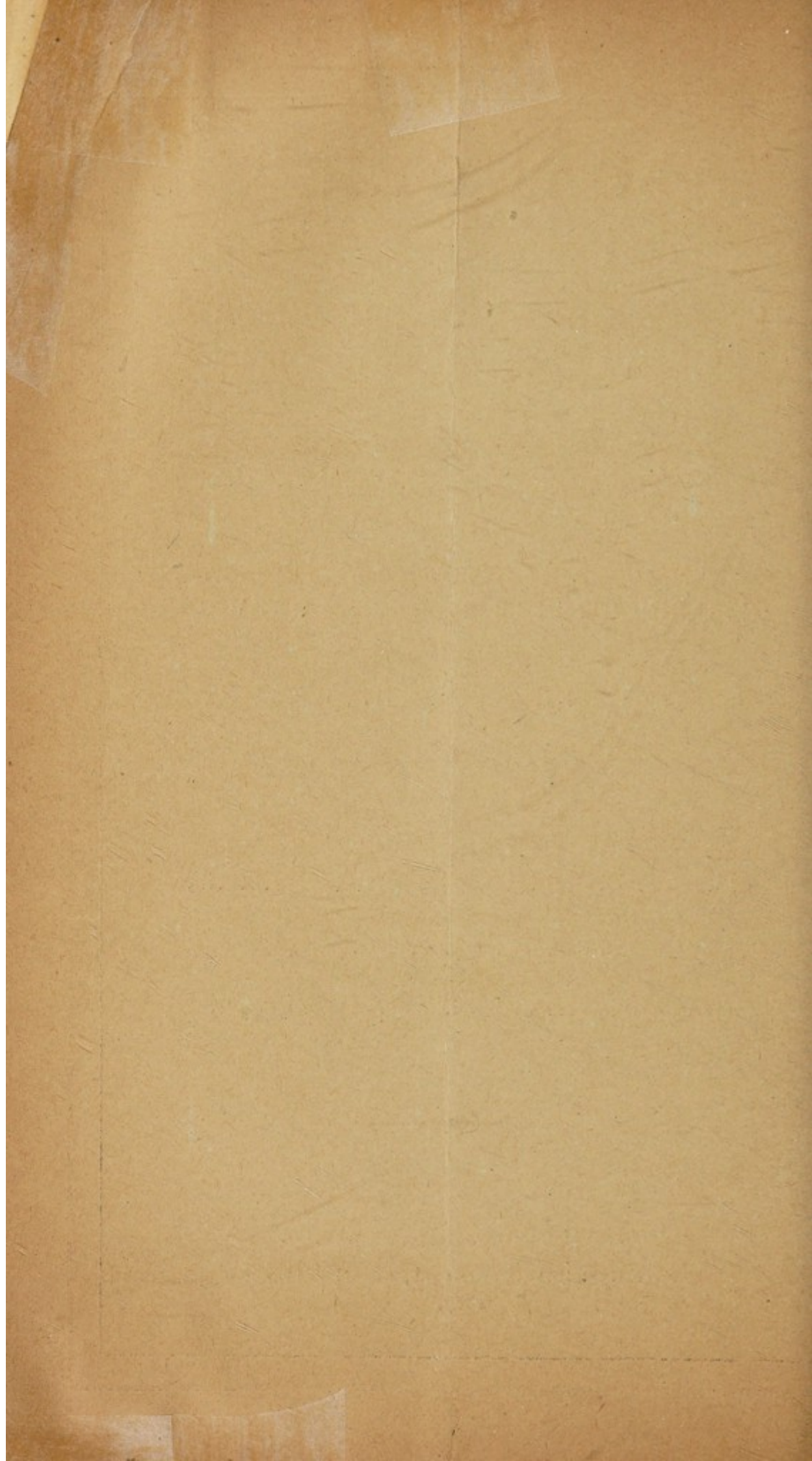
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NEW YORK: G. P. PUTNAM'S SONS, 1897.

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1897

## P R E F A C E .

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My object in writing this small *Brochure* is to bring before the profession and the public the gross injustice perpetrated by the late Government in abolishing the "Contagious Diseases Prevention Act," in the face of overwhelming proof of its immense benefit, for the comparative short time it had been in operation, in some of our larger garrison towns.

This was absolutely accomplished at the behest of some interested and adventurous politicians and their misguided partisans of all denominations, without—marvellous to relate—even the most feeble resistance on the part of the "opposition."

It is to be devoutly desired that, when the latter are made more conversant with the awful results, and responsibilities, of their unfounded prejudices, and wilful obstruction, in thus fostering the "visitation of the sins of the fathers on the children to the third and fourth generation," yea, and much further,—they may be more inclined to join issue with its conscientious, and unprejudiced supporters, to agitate unceasingly for the restitution of a measure incontestably proved to be transcendently beneficent in its effects, both morally and physically.

PREFACE

The following is a list of the names of the persons who have been named in the text of the book. The names are arranged in alphabetical order of the surnames. The names of the persons who have been named in the text of the book are: [illegible]

## ON CANCER, &c.

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THE blood origin of *Cancer*, or, in other words, its constitutional character, has always been recognized from the earliest times, and the effort to establish the theory of its *local* origin, advanced by Mr. de Morgan, and so elaborately debated at the "Pathological Society" some twelve years ago—will be doubtless fresh in the memory of many of my readers—signally failed, there cannot be a shadow of a doubt, and the mountain in labour proved conspicuously abortive.

But it is nevertheless true that a link was missing in the chain of evidence to establish the fact beyond dispute, and this was not supplied at the time by several veteran pathologists, foremost among whom may be enumerated Paget, Jenner, and Simon, who decidedly, in my opinion, bore the palm in the discussion. Although, it is true, their subtle inductions, and eloquent expositions, went only just as far as it was possible under the circumstances, to establish the already accepted theory of the *constitutional* character of cancer. And I am not aware of any investigations having been since instituted in regard to this momentous question.

This missing link, by which is implied the source from whence the *materies morbi* is derived to which cancer owes its origin, hitherto shrouded in mystery, and the solution of which it were vain, in my humble opinion, to attempt without first establishing that fact.

I think there are few in the profession who would really deny the constitutional character of cancer; still, it can be hardly conceived possible that, a disease so formidable, could be derived from healthy blood or tissue, or that any abnormal process *per se* within the body, could generate the same—*Ex*



*nihilo nihili fit.*—And one strong and overwhelming argument and clinical proof, against the *local origin* of cancer, &c., is the fact of its invariable return after extirpation in any form, perhaps more or less remote from its original seat, doubtless owing to the removal of the point of selective attraction, and concentration for the *materies morbi* from the blood:

That it has a *primary local* origin there cannot be a doubt in my mind—not in the general sense of the term as used by Mr. de Morgan, to be hereafter described—for it appears evident that no disease can be constitutional in the strict sense of the word without the introduction of the *materies morbi*, whatever it may be, into the system by some means or other, as in zymotic diseases, at a period more or less remote, anterior to its local manifestation. The character of the disease from syphilitic origin *per se* being determined by synthetical relations, so to speak, established in the different stages of its development. No attempt was made in this direction, hence obviously the barrenness of the discussion, and complete failure in arriving at a more comprehensive mode of dealing with this fell disease, no doubt laudably contemplated by its promoters.

I have long entertained a very strong conviction in the *syphilitic* origin of cancer, and also of *struma* or *scrofula*, *lupus*, *tubercle*, and their allied hereditary malignant affections; and that they are all multiparous offsprings of the same parent, under different stages of development, there can be little doubt—their form, in all probability, being determined by “selective assimilation” and *combinations*.

Take, for example, a well marked case of *struma* in the female, the same becoming impregnated from a syphilitic source in any of its characters. Might not the offspring of these individuals, with joint combinations of the same disease in different forms and stages of development, generate *cancer*? Or, at least, might it not generate a specific condition of the blood in the offspring favourable, on its further admixture in some form or other, to its development and explosion at some future period?

*Lupus* appears the least removed from the parent stock of any of this rather numerous family group, and when locally situated in a more or less *exedens* form on the genitals, particularly on the pudenda in the female, would, only for the infective history and more acute character of *phagedæna*, at first sight be easily mistaken for that affection.

When otherwise situated—most frequently on the face—the *tertiary* forms of syphilis are perhaps still more approximated in character to the various *non-exedens lupoid* forms of disease.

As regards tubercle, I think it would be a difficult matter to distinguish between the ordinary lung-form of the disease, and that in what is known as *syphilitic phthisis* and that of *gummata* in other parts, save and except the characteristic difference imparted, through the variety in structures involved.

I merely glance at these facts *en passant*, as it would be out of the question, in the small space now at my disposal, to elaborate and systematize the whole range of a subject so extensive and complex, and which must be left for further observation for its solution.

There is another very strong point in favour of the blood, or constitutional origin of cancer, &c., and that is, its development in the decline of life, or, at all events, at the commencement of that epoch, or perhaps, sooner, from other depressing influences, when degenerative perversion of nutrition generally sets in, in some measure, no doubt, owing to the withdrawal of the inhibitive power of a vigorous circulation, obviously under the controlling power of equally strong *vaso motor* influences.—Not that I look upon nerve force as if it were ethereal, or spontaneous, in the same light as the “nonentity” supporters of the origin of disease or, in convertible terms, disciples of *Hahnemann in disguise*, undoubtedly imply.

On the contrary, I consider that the nerves of organic life must be nourished by *good* or *bad* blood, and it is well known, hold most important vital influence over the blood-vessels, more particularly the *arteriols*, or their peripheral extremities, there-

by physiologically regulating healthy nutrition and reconstruction of tissue; or, pathologically, on the other hand, an unhealthy nutrition, with its associated morbid products and change of structure, on the principle of "*selective assimilation*." And thus demonstrating beyond dispute, if not the primary source of reconstructive force, the co-ordinate, and the equal importance, to say the least, of the blood in the process.

There is also every probability that the *materies morbi* in cases of *hereditary* cancerous diathesis may frequently exist in an *attenuated* or *quiescent* form in the system without ever making any local manifestation, *i.e.*, when not fully developed, or when on the wane, and in the absence of *exciting* local causes. Might not this condition be more frequently associated than is generally supposed with those obscure premature senile degenerations, *cachexia*, pernicious *anæmia*, &c., so often met with; idiopathic in character, and having no known local origin?

With the views already succinctly enunciated it will, I think, follow as a natural corollary that the *reproductive* organs more particularly, and their *accessories*, the breasts, should have greater elective affinity or assimilation, than other parts, for cancerous disease. *The fons et origo mali*, in the first instance, and the fundamental factor of the syphilitic virus from *promiscuous sexual excesses* in the female; and whence its primary source and propagation to the male.

Having so far, I think, pretty clearly advanced strong presumptive evidence of the *syphilitic* or *constitutional* origin of cancer, &c., not, it is true, from a *histological* point of view—although it is true we may ere long expect to gain some remarkable revelations from this source—but from rational deductions, founded on historical, clinical, and pathological facts, already adverted to in connection with these diseases.

In correcting the proof of these sheets for the *press*, I came accidentally upon *Tweed's* new blastoderm doctrine, so ably enunciated in his original and masterly lecture, delivered in University College, London, and published in the "*Lancet*," of

the 8th inst., and which, when further developed, will help to throw immense light on this subject.

I am quite ready to admit that I have not solved this much vexed and perplexing problem—the *cure* of cancer—but by deviating from the long beaten path, and advancing a step further, I am in a position, in my opinion, to show the only way by which cancer and its formidable congeners, if *not cured*, may be *prevented*; and the prevention of disease now holds a position not a whit less important than that of its cure, in relation to zymotic diseases; but how vastly greater must be its importance in relation to the fell maladies under discussion, the very scourges of humanity, and alike deteriorating and destructive to our race, morally and physically.

That I am now referring to the “Contagious Diseases Prevention Act” will have been perhaps anticipated, which would, if comprehensively and thoroughly carried out, so strong is my conviction, not only by securing comparative immunity and protection from those malignant diseases; but prove an inestimable blessing in the regeneracy of our species for untold ages.

I have been now more particularly prompted to make these few remarks through the deplorable, and, to say the least, culpable action of the Government in abolishing the “Contagious Diseases Prevention Act” at Plymouth and other large garrison towns, where, it was admitted on all hands—even, I believe, by those most prejudiced—that the measure had been productive of immense and incalculable good, during the comparative short time it had been in operation, not only as a deterrent in checking prostitution on its very threshold; but by also affording the means of curing syphilitic disease in its primary inception, through the agency of a well regulated and lengthened course of mercury, which is now well known and generally admitted to be a complete antidote to the syphilitic poison, instead of being left in the hands of ignorant and mercenary charlatans, for wrong treatment—or perhaps without any treatment at all. And, further, the prevention of primary sores, &c., often by the timely and salutary

inculcations of personal cleanliness, which, most assuredly, in these sad cases, is next to godliness.

The regular and healthy inspection, and supervision, to which prostitutes, under this Act, are subjected, has a tendency to create a healthier tone of mind, sometimes doubtless followed by reformation ; but, at all events, inimical to that total abandonment in their reckless downward course, so frequent when left untended and uncared for. When unbridled and uncontrolled, they go forth, insiduously disseminating their virulent poison broadcast, which—serpent like—they are often insensible to themselves, especially in its incipient and most infective stage. This reminds me of the graphic description given in “Cooper’s (Sam) first lines,” which will doubtless be familiar to most of my older readers (almost the only surgical class book of any note in my student days), of the famous Lisbon opera dancer during the Peninsular campaign, when many British officers had good reason to lament their temerity in having succumbed to her fascinations, through a most virulent and destructive form of *phagedæna*, while the actress herself, almost unconscious of its existence, prosecuted her calling with unabated charms and re-doubled vigour, and continued to captivate, and infect, her unwary, and unfortunate victims wholesale.

I bring these facts forward principally to combat the erroneous impression entertained, and promulgated unblushingly, by some of the most bigoted opponents to the “Contagious Diseases Prevention Act,” who, on the contrary, endeavour to enunciate the notion that, the male is the principal source of infection, and dissemination of the disease, and, therefore, should equally share the odium of sanitary inspection and control. Nothing could be more absurd, and further from the truth. Granting that in the male coitus were unattended with pain, which is well known on the contrary it is not. The bare fact that the female makes it a traffic, so that if she did suffer therefrom more or less, dire necessity compels her to yield : and the foregoing context altogether goes to prove that the male, with rare exceptions, is purely passive

so far as the *genesis* and the *propagation* of the syphilitic *virus* goes.

In these days of forced celebacy it were utter madness, even if it was practicable—which I emphatically deny—to attempt to abolish prostitution in all its forms. Is it not, therefore, better to look the inevitable full in the face, and try to remedy what cannot be prevented as long as this world lasts? Unless it is true it may be so mitigated in the course of time, through the instrumentality of *this very "Act"* in its beneficent effects on body and mind, and the establishment of the "*mens moralis in corpore sano.*"

I emphatically deny the cant cry promulgated by unscrupulous and interested politicians, and their blinded partisans, that the "*Act*" *perpetrates*, and *legalises* evil that, good may come. They might with as much justice argue that to obstruct the depredations of a burglar may be legalised and justified on the same grounds. On the contrary, I maintain that the "*Act*" overcomes evil all throughout by good.

To carry out this project effectually—which I do not hesitate to designate as one of the greatest problems of our time—requires combined, resolute, and unremitting agitation on the part of the medical profession, with the undaunted courage of their convictions, and all the emphasis of their actions in every way, as natural arbiters in its destinies.—First of all by removing unfounded and deep-rooted prejudices that, have so tenaciously laid hold of certain sections of the community. And the public have a right to insist that no maudlin sentimentalities, religious scruples, or fanaticism, should be permitted to stand between the carrying out in its integrity, legislation so vitally important in its bearing on the national well-being.—Personally, I feel most sanguine as to the result in every respect, and that not very many years will have elapsed—if the Act be carried out in its strict integrity—before the Registrar-General's reports will indicate a considerable falling-off in the death-rate from cancer, consumption, *et hoc genus omne*, and thus prove my position by solving the long-vexed question of the *origin* and *prevention*, or, in

other words, the *cure* of cancer, and its allied affections.

In conclusion, I have as briefly as practicable endeavoured, imperfectly I am aware, to set forth the principal features of this interesting and all-important subject, with the view of enlisting the active co-operation of my confreres at large, and the section of the public interested in the success, and speedy restitution, of the "Contagious Diseases Prevention Act."

*"Salus populi suprema est lex."*



